MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/ 560394
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1" AMENDMENT		AFTER 2 ** AMENDMENT	
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CLAIMS		Mary 1		P 12		SK !!

PTO - 1360 (REV. 11/04)

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TOTAL DEP.		4	28	←		+
TOTAL CLAIMS			30			

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